## State of New Mexico

to Appropriate District Office	prisie Energy, Minerals and Natural Resources Department		Revised 1-1-89	
DISTRICT I P.O. Box 1980, Hobbs, NM 88240	OIL CONSERVATION DIVISION		WELL API NO.	
Santa Fe, New Mexico 87504-2088 P.O. Drawer DD, Artesia, NM 88210			5. Indicate Type of Lease STATE FEE X	
DISTRICT III 1000 Rio Brazos Rd., Aziec, NM 87410	6. State Oil it Gas Lesse No.			
SUNDRY NOT ( DO NOT USE THIS FORM FOR PR DIFFERENT RESE (FORM (	7. Lease Name or Unit Agreement Name TAYLOR GLENN			
1. Type of Well: OR. GAS WELL [X] WELL	OTHER		·	
2. Name of Operator Shell Western E&P Inc.	<u></u>		8. Well No.	
3. Address of Operator P.O. Box 576 Houston, T.	x 77001-0576 WCK 44	135)	9. Pool name or Wildcat HARE SIMPSON	
4. Well Location Unit Letter 1 : 33	376 Feet From The NORTH	Line and	764 Feet From The EAST Line	
Section 3  11. Check  NOTICE OF IN	Township 21S Ram 10. Elevation (Show whether I 3495' DF Appropriate Box to Indicate N TENTION TO:	Nature of Notice, F	Report, or Other Data BSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK	ALTERING CASING	
TEMPORARILY ABANDON	CHANGE PLANS	COMMENCE DRILLIN	G OPNS. PLUG AND ABANDONMENT	
PULL OR ALTER CASING		CASING TEST AND C		
OTHER:		OTHER: ACD		
12. Describe Proposed or Completed Oper work) SEE RULE 1103.	rations (Clearly state all pertinent details, an	d give pertinent dates, incl	uding estimated date of starting any proposed	
2-20 TO 2-25-91:				
POH W/PROD EQUIP. ACD MC 2000# ROCK SALT. INST PRO	CKEE/CONNELL PERFS 7804' - DD EQUIP & RETD TO PROD.	8082' W/4200 GA	.LS 20% HCL. +	

I hereby certify that the information above is true and complete to the best of my knowledge and belief. DATE 4/17/91 TELEPHONE NO. 713/870-3797 J. H. SMITHERMAN TYPE OR PRINT NAME

(This space for State Use)

ORIGINAL SIGNED BY JERRY SEX 9540

APR 2 2 1991

MISTRICT I SUPERVISOR

CONDITIONS OF APPROVAL, IF ANY:

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## ETATE OF NEW MEXICO ENERGY AND MIDERALS DEPARTMENT

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## OIL CONSERVATION DIVISION P. O. BOX 2088 SANTA FE, NEW MEXICO 87501

	u 4.u.e,		MEXICO 87501						
	REQUEST FOR ALLOWABLE								
	AS								
	Shell Western E&P, Inc.								
	Addiese								
	Resson(s) for biling (Check proper	bos/	<del></del>						
	Now Well	Change in Transporter of:	Other (Please explain	)					
	Recompletion Change in Ownership	<b>6</b>	y Gos	•					
	If change of ownership give non- and address of previous owner	Shell Oil Company, P.(	O. Box 991, Houston, Te	yas 77001					
11	PESCRIPTION OF WELL AN	ID LEASE		vas 77001					
	Taylor Glenn	Well No. Pool Name, Including 4 Hare Simpso		Lean No					
	Location Unit Letter I . 3	376 Feet From The NOTHN	71.11	100					
	20	T. mahtp 215 · Ronge	37F	rom The East					
			, AMPM, LCC	County					
	Laura or Varvoetrag tteutbottet et		GAS Address (Give address to makin)	pproved copy of this form is to be sent)					
	Shell Pipeline	Corporation	11.0. ODX 1910 Wi	Nam / TD 70 700					
	Getty . O/ Compar		TOTAL BEESELL IN MAICH &	pproved copy of this form is to be sent!					
• :	Getty . O// Compar	Unit   Sec. Twp. Rge.	P.O. Box 1137 Funic	e. New Mexico 88231					
	tive location of tanks.	No Change	Is gas actually connected?	, when					
	If this production is commingled a COMPLETION DATA	with that from any other lease or poo	l, give commingling order number:	NA .					
	Designate Type of Complet	ion - (X) Gas Well	New Well Workover Deepen	Plug Beck   Some Res'r. Diff. Res^					
	Date Spudded	Date Compl. Rendy to Prod.	Total Depth	P.a.T.D.					
	Lievauous (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	•					
-	Perforations	1		Tubing Depth					
			•	Depth Casing Shoe					
	HOLE SIZE	TUBING, CASING, AP	O CEMENTING RECORD						
	HOLE 312E	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					
			<del>                                     </del>						
!									
- !									
V.	TEST DATA AND REQUEST FOLL WELL  Date First New Off Run To Torks			oil and must be equal to ar exceed top allow					
	•	Date of Test	Producing Method (Flow, pump, gas	lift, etc.)					
	Length of Test	Tubing Pressure	Cosing Pressure	Choke Size					
	Actual Prod. During Test	Otl-Bale.	Water-Bals.	Gas-MCF					
•	gas well								
	Actual Frad. Tool-MCF/D	Length of Test	Bbie. Condensate/AMCF	Gravity of Condensate					
- -	. coling Melhod (pitot, back pr.)	Tubing Presews (Shat-ia)	Cosing Pressure (Shut-in)	Choke Size					
ــا ۲. c	ERTIFICATE OF COMPLIANC	I .							
<b></b> -	•	egulations of the Oil Conservation	OIL CONSERVATION DIVISION FEB 1 1984						
-	TO THE PERSON OF	and that the tales of the terminal	AL PROVED	. 19					
	to the	best of my knowledge and belief.	BY ORIGINAL SIGNED	BY JERRY SEXTON					
7-	J. Coursey		TITLE DISTRICT IS	UPERVISOR					
	(1) =/	:	This form is to be filed in compliance with null 1104.  If this is a request for allowable for a newly drilled or despens well, this form must be accompanied by a jabulation of the deviation taken on the well in accordance with null 111.  All sections of this form must be fulled out completely for allowable on new and recompletely wells.						
	Attorney-in-Fact	(way)							
	- (Tid	•)							
_	Upun	ctive January 1, 1984	Fill out only Sections !	relia. II. III, and VI for changes of owner iter, or other such change of condition					
	•		Separate Forms C-104 must consoleted wells.	at he filed for each pool in multiple					

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INN 19 1984

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